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Postoperative lymphocele after revision circumferential long-segment scoliosis construct for pseudarthrosis

The patient was a 69-year-old female who had previously undergone a T10-ilium posterior spinal fusion for lumbar scoliosis and spinal stenosis. She presented 2 years after the index procedure for new complaints of low back pain and midthoracic pain, and a feeling of “tipping over.” Scoliosis survey and computed tomography (CT) revealed proximal junctional kyphosis with cephalad degeneration and pseudarthrosis at L5–S1 and L3–L4. She subsequently underwent anterior lumbar interbody fusion from L3 sacrum and revision posterior spinal fusion from T3 ilium the same day. She recovered uneventfully until she returned for follow-up approximately 3 weeks after surgery. At that time, she complained of a distention that

manifested as her pants and clothing were not fitting properly. On examination, she exhibited a distended abdomen and fluid wave was percussed. A CT was obtained that revealed an 11×15-cm fluid collection in the retroperitoneal space on the left. She was taken to the interventional radiology suite where an ultrasound-guided aspiration was performed, and a “pigtail” percutaneous drain was placed. She was sent home with an indwelling drain for several weeks, and she recovered uneventfully with the drain being discontinued 2 weeks later. Her follow-up CT scan revealed resolution of her fluid collection, and fluid analysis was consistent with a lymphocele most likely because of the extensive dissection required for an extended retroperitoneal exposure. The patient is now more than 3 years postoperative and is doing well. This case represents one of the many complications that can arise from an anterior lumbar interbody fusion procedure done through a retroperitoneal approach, and I now counsel patients on this matter (Figs 1–3).



Fig. 1. Preoperative standing lateral radiograph showing proximal junctional kyphosis.



Fig. 2. Postoperative standing lateral scoliosis film.

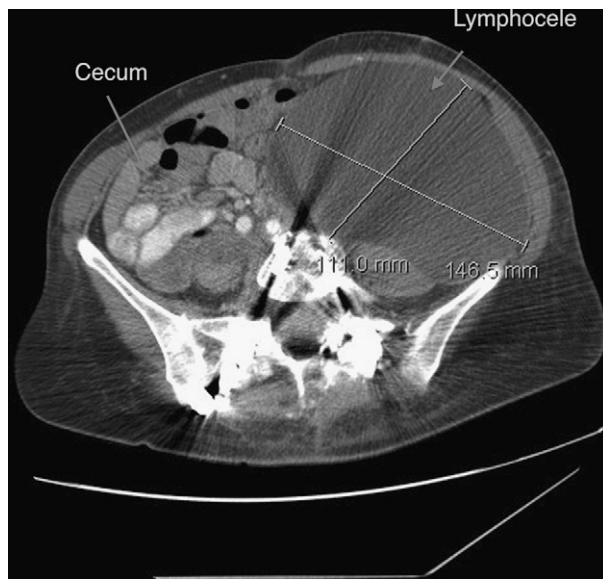


Fig. 3. Postoperative computed tomography scan showing measurement of lymphocele.

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The disclosure key can be found on the Table of Contents and at www.TheSpineJournalOnline.com.

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